## PART B - FEE(S) TRANSMITTAL

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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

| APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION 09/941,782 08/30/2001 Takashi lwaki 35.C15730 7656  TITLE OF INVENTION: ELECTRON-EMITTING DEVICE, ELECTRON SOURCE AND METHOD FOR MANUFACTURING IMAGE-FORMING APPARATUS  APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DOTAL FEE(S) DUE DATE DOTAL FEE(S) DUE DATE DATE DATE DATE DATE DATE DATE DAT  | address as<br>RESS" for                      |
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| FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112  APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATIC TITLE OF INVENTION: ELECTRON-EMITTING DEVICE, ELECTRON SOURCE AND METHOD FOR MANUFACTURING IMAGE-FORMING  APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE IN nonprovisional NO \$1400 \$300 \$0 \$1700 01/02/2  EXAMINER ART UNIT CLASS-SUBCLASS  MACCHIAROLO, PETER J 2879 445-060000  1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 1 Fitzpatrick, Cel 2 Harper & Scinto  1. Fitzpatrick, Cel 2 Harper & Scinto  | ompanying                                    |
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| "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  "registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is 1 listed, no name will be printed.   | .la,   |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has bee recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  CANON KABUSHIKI KAISHA  TOKYO, JAPAN  | n filed for                                  |
| Please check the appropriate assignee category or categories (will not be printed on the patent):  | overnment                                    |
| 4a. The following fee(s) are submitted:  Issue Fee  A check is enclosed.  Publication Fee (No small entity discount permitted)  Advance Order - # of Copies 5  Ab. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credioverpayment, to Deposit Account Number 50-3939 (enclose an extra copy of the state of th | it any<br>nis form).                         |
| 5. Change in Entity Status (from status indicated above)   |  |
| a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).  NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other than the applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).   | er party in                                  |
| Authorized Signature  Authorized name Frank A. DeLincia  Registration No. 42,476   |  |
| This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, presubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Comm Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Alexandria, Virginia 22313-1450.  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.  | o complete<br>nerce, P.O.                    |